ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-01902A
Timber Knoll Homeowners Association, Inc.
dba T.K. Water Service
PO Box 200
Vernon, AZ 85940



ANNUAL REPORT Water

FOR YEAR ENDING

12 31 2009

FOR COMMISSION USE

ANN 04 09

4-26-10

COMPANY INFORMATION

	TIMBER KNOW HOMEOU	UNEES ASSOC	19TICH, INC
Company Name (Business Name)	DBA T.K. WATER S.	ERVICE	
Vailing Address P. C. BOX	202		
Mailing Address P. C. BOX (Street) VERNON (City)	XVV		
VERNON	A2		85940
(City)	(State)	(2	Zip)
938 532-2976	N/A Fax No. (Include Area Code)	J.	VIA
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Email Address N/A			
	BOX 200		
Local Office Mailing Address	Street) #2 (State)		
<u>VERNON</u>	A2 (State)	<i></i>	594 6 Zip)
(City)	(State)	(
928-532-2970	Fax No. (Include Area Code)	/	VIA
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Inc	lude Area Code)
□Regulatory Contact:			
Management Contact: MAK	NELSON (Name)	PRE	SIDENT Title)
		Γ)	itle)
P. O. BOX 323 (Street)	VERNER	42	15940
(Street)	(City)	(State)	(Zip)
428-532 2970	NIA	NI	4
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Email Address A/A			
On Site Manager: MAX	NELSON (Name)		
P.O.BEX 323	VERNER	AZ	85740
(Street)	(City)	(State)	(Zip)
928 - 532-2970	NA	NIA	,
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Email Address NIA			

	R KNOW HOMEOWN		TION INC
Statutory Agent:	SAMBRA A	BRATCHER	
	(1141110)		0-011-
(Street)	VERNON (City)	AZ- (State)	85940 (Zip)
938-537-707	Fax No. (Include Area Code	Cell No. (Incl	
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Cell No. (Incl	ide Area Code)
Attorney: N/A			
	(Name)		
(Street)	(City)	(State)	(Zip)
(Succe)	(Oity)	(State)	(2.4)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
Email Address			
<u>.</u> <u>C</u>	WNERSHIP INFORMA	<u>TION</u>	
Check the following box that applies	to your company:		
Sole Proprietor (S)	C Corporation	on (C) (Other than Ass	ociation/Co-op)
Partnership (P)	Subchapter S	Corporation (Z)	
Bankruptcy (B)	Association/C	Co-op (A)	
Receivership (R)	Limited Liab	ility Company	
Other (Describe)			
	COUNTIES SERVEI	<u>)</u>	
Check the box below for the county/i	es in which you are certificated	to provide service:	
APACHE	☐ COCHISE	COCONI	NO
☐ GILA	☐ GRAHAM	GREENL	EE
☐ LA PAZ	☐ MARICOPA	☐ MOHAVI	${\mathfrak T}$
☐ NAVAJO	☐ PIMA	☐ PINAL	
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA	
☐ STATEWIDE			

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	5,763	5,763	0
307	Wells and Springs	5,763	4,280	4
311	Pumping Equipment	10,227	6, 145	3,582
320	Water Treatment Equipment	494	348	96
330	Distribution Reservoirs and Standpipes	6,440	6,440	8-
331	Transmission and Distribution Mains	63,505	42.682	20,823
333	Services	4.041	3,850	191
334	Meters and Meter Installations	3,848	2,530	1318
335	Hydrants	-		
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	165	165	6
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	98,763	73.753	26,010

This amount goes on the Balance Sheet Acct. No. 108

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	5,763		-0
307	Wells and Springs	4,280		0
311	Pumping Equipment	10,227		1,179
320	Water Treatment Equipment	494		25
330	Distribution Reservoirs and Standpipes	6,440		0
331	Transmission and Distribution Mains	63,505		3415
333	Services	4,041		12
334	Meters and Meter Installations	3,848		82
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	165		6
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	98,763		3,713

This amount goes on the Comparative Statement of Income and Expense _ Acct. No. 403.

BALANCE SHEET

Acct No.			BALANCE AT EGINNING OF	В	ALANCE AT END OF
140.	ASSETS	Ð	YEAR		YEAR
	ASSETS		· · · · · · · · · · · · · · · · · · ·	-	
	CURRENT AND ACCRUED ASSETS			 	
131	Cash	\$	15,962	\$	14,506
134	Working Funds				
135	Temporary Cash Investments				
141	Customer Accounts Receivable				
146	Notes/Receivables from Associated Companies				
151	Plant Material and Supplies				
162	Prepayments			<u> </u>	
174	Miscellaneous Current and Accrued Assets				
	TOTAL CURRENT AND ACCRUED ASSETS	\$	15,962	\$	14,506
				1	111300
	FIXED ASSETS			 	
101	Utility Plant in Service	\$	97,058	\$	98,763
103	Property Held for Future Use				
105	Construction Work in Progress				
108	Accumulated Depreciation – Utility Plant		69.040	<u> </u>	73,753
121	Non-Utility Property				
122	Accumulated Depreciation – Non Utility				
	TOTAL FIXED ASSETS	\$	28,018	\$	26,010
	TOTAL ASSETS	\$	43,980	\$	40,516

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
<u>.</u>	CURRENT LIABILITES		, , , ,
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		,
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits	Ð	-0-
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	43,980	40,516
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$ 43,980	\$ 40,516

COMPANY NAME TIMBER KHOLL HOME OWNERS ASSOCIATION INC

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 16004	\$ 15,709
460	Unmetered Water Revenue		
474	Other Water Revenues		
	TOTAL REVENUES	\$ 16,004	\$ 15,709
- 4	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power	2422	2,344
618	Chemicals		
620	Repairs and Maintenance		
621	Office Supplies and Expense	350	983 9623
630	Outside Services	7,40	9623
635	Water Testing	7.4R 2050	811
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense	3, 650 1, 054 450	3.713 1,274 422
408	Taxes Other Than Income	1,054	1,274
408.11	Property Taxes	450	422
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 17.386	\$ 19.170
	OPERATING INCOME/(LOSS)	\$ -1,382	\$ -3,461
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	-2	-2
	TOTAL OTHER INCOME/(EXPENSE)	\$ -2	\$ -2
	NET INCOME/(LOSS)	\$ -1,384	\$ - 3,463

COMPANY NAME TIMBER KNILL HOMEOWHERS ASSOCIATION, INC

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	NIA			
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$ 0	
Meter Deposits Refunded During the Test Year	\$ 6	

COMPANY NAME	TIMBER	RNOLL	HOMEOWNERS	ASSOCIATION, INC	
Name of System:		ADEQ	Public Water System?	Number:	

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-646115	5	20	640	6"	578 x 314	1962
					i var avar	, , , , ,

^{*} Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
NONE		

BOOSTER PUN	MPS	FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other	
3/4	2	NONE	HONE	
,				

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	TIMBER	KNOCK	HOMEOWNERS	ASSOCIATION, INC	
Name of System:	ADEQ Public Water System Number:				

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

I	MAINS	
Size (in inches)	Material	Length (in feet)
2	Pic Pic Pie	3195 200 350
3	PIC	Dea
4	Ple	350
5		
6	PIC	5360
8		
10	•	
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X ³ / ₄	45
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

TREATMENT EQUIPMENT:

i) ATTOMATIC CHECKINATOR

STRUCTURES:

i) WELL HOUSE

D PRESSURE TANK HOUSE

OTHER:

A ONE

For the following three items, list the utility owned assets in each category for each system.

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	TIMBER	KHOLL	HOMEOW NERS	ASSOCIATION,	Ne.
Name of System:	ADEQ Public Water System Number:				

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	49	321	329	NIA
FEBRUARY	49	151	158	
MARCH	49	160	171	
APRIL	49	215	223	
MAY	49	294	299	
JUNE	49	336	342	
JULY	49	320	392	
AUGUST	49	387	396	
SEPTEMBER	49	308	317	
OCTOBER	49	226	231	
NOVEMBER	49	172	181	
DECEMBER	49	3/2	318	
	$TOTALS \longrightarrow$	3.262		(

What is the level of arsenic for each well on your system? mg/l (If more than one well, please list each separately.)
If system has fire hydrants, what is the fire flow requirement?GPM forhrs
If system has chlorination treatment, does this treatment system chlorinate continuously? (Yes () No
Is the Water Utility located in an ADWR Active Management Area (AMA)? () Yes (YNo
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement? () Yes () No
If yes, provide the GPCPD amount:

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	TIMBER	KNOW	HOMEOWNERS	ASSOCIATION.	INC
Name of System:	ADEQ Public Water System Number:				

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY	N/A	NA	NA
FEBRUARY			
MARCH			,
APRIL			
MAY)		
JUNE			
JULY)	
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
$TOTALS \rightarrow$			

OTHER (description)):				
		 ·			
				and the second through the secon	
		 	2.0.0.7		

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2009 was: \$ \(\frac{42212}{}\)
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why

Posting Date: 2009-10-13 Sequence #: 7790489638 Account #: 20643732 Routing Transit: 12210002 Amount #: \$86.95

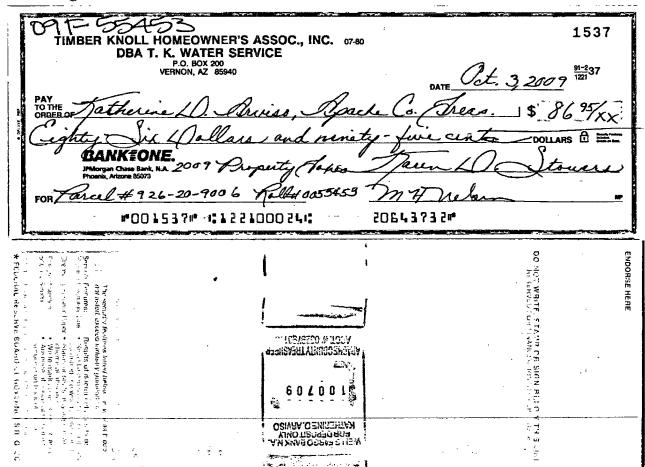
Check/Serial #: 000000001537

Bank #: 601 Tran Code: 000000

IRD: 0 ItemType: P

BOFD: 000000000

Cost Center: N/A
Teller Number: N/A
Teller Seq Number: N/A
Processing Date: N/A



Posting Date: 2009-10-13
Sequence #: 7790489637
Account #: 20643732
Routing Transit: 12210002
Amount #: \$335.17
Check/Serial #: 000000001536

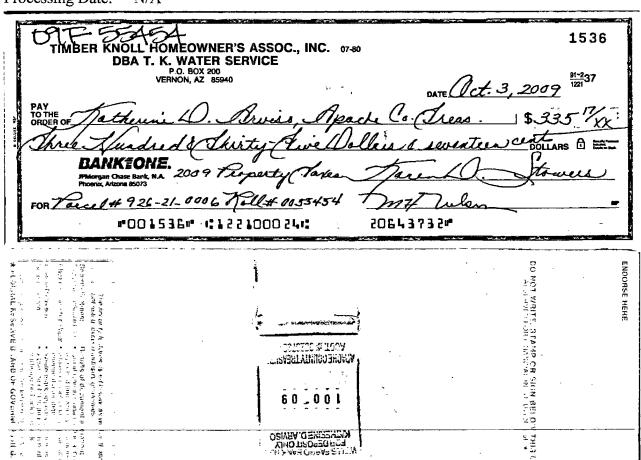
Bank #: 601

Tran Code: 000000

IRD: 0 ItemType: P

BOFD: 000000000

Cost Center: N/A
Teller Number: N/A
Teller Seq Number: N/A
Processing Date: N/A



VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED
Contract of the second
ACC UTILITIES OF

VERIFICATION

STATE OF GUZERA

I, THE UNDERSIGNED

OF THE

TITES DI	Dr.
COUNTY OF (COUNTY NAME) CRACKE	NECTOR
NAME (OWNER OR OFFICIAL) TITLE NULSCH, PARA	ノ
under Krall Homeowners as	be

<u>DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION</u>

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OR OFFICIAL

(928) 532-2970

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

COUN

sache

THIS

18 th

DAY OF

MONTH Misiah

.20<u>/</u>&

OFFICIAL SEAL
C. BRADLEY
NOTARY PUBLIC - ARIZON
APACHE COUNTY

APACHE COUNTY
IN Expires May 24, 2013

SIGNATURE OF NOTABY PUBLIC

COMPANY NAME TIMBER KNOW HEMEUW NEES ASSOCIATION YEAR ENDING 12/31/2009

INCOME TAXES

For this reporting period, provide the following:	
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	100 O
State Taxable Income Reported Estimated or Actual State Tax Liability	-100 45
Amount of Grossed-Up Contributions/Advances:	
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances	& & &
Total Glossed-Op Collinoudons/Advances	

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE 3-17-2010
DATE

MH, NELSON PRESDENT
PRINTED NAME TITLE

VERIFICATION AND SWORN STATEMENT



	intrastate Revenues Uni	Y fire
VERIFICATION		
STATE OF UNE ZONA	COUNTY OF (COUNTY NAME)	ACC UTILITIES
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) TITLE	Thesider ETTOR
OF THE	Jender Know Henceon	new Ussec.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 15,709

(THE AMOUNT IN BOX ABOVE

INCLUDES \$ 1,274

IN SALES TAXES BILLED, OR COLLECTED)

532-2970
TELEPHONE NUMBER

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

C. BRADLEY

NOTARY PUBLIC - ARIZONA

APACHE COUNTY

My Comm. Expires May 24, 2011

DAY OF

COUNTY NAME ARBEI

MONTH Hurch

.20 ノグ

SIGNATURE OF NOTARY PUBLIC

VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

Intrastate Revenues Only



VERIFICATION

		Su
STATE OF ARIZONA	COUNTY OF (COUNTY NAME) DEACHE	
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) NO SEE A SECONDARIO NO SECONDARIO	TITLE / reside it
OF THE	COMPANY NAME	iners assoc,

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 12 31 2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE UTILITY OPERATIONS</u> RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2009 WAS:

DAY OF

ARIZONA INTRASTATE GROSS OPERATING REVENUES	
\$ 15,709	

THE AMOUNT IN BOX AT LEFT INCLUDES \$_
IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIGNATURE OF OWNER OR OFFICIAL

(928) 532-2970

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

NOTARY PUBLIC NAME

COUNTY NAME

COUNTY NAME

MONTH MICHAEL

20/0

OFFICIAL SEAL

C. BRADLEY

NOTARY PUBLIC - ARIZONA

APACHE COUNTY

My Commit Expires May 24, 2011

MY COMMISSION EXPIRES

5/24/2011

Bladely SIGNATURE OF NOTARY PUBLIC